



Sample Identification

	Document Classification	<input type="checkbox"/> Policy	<input type="checkbox"/> Procedure	<input checked="" type="checkbox"/> Policy and Procedure
	Document Type:	<input type="checkbox"/> Administrative	<input checked="" type="checkbox"/> Clinical	
	Applicability:	<input checked="" type="checkbox"/> Organization	<input type="checkbox"/> Hospital	<input type="checkbox"/> NMG
Effective Date: 10/30/2008				

Purpose:

To describe proper sample identification and to provide a standardized approach to handling samples when the identity is in question.

Policy:

All samples submitted to the Laboratory must be properly labeled, and have accompanying orders submitted either electronically or on a manual requisition. Orders and samples must be labeled by the collector at the patient's side with at least two unique identifiers. At NMC, the preferred identifiers are:

- Full legal name (no nicknames or abbreviations)
- Date of Birth

Samples submitted for Blood Bank testing must also include the date, time, and initials of the person collecting the blood written on the tube. Requisitions should include pertinent billing information (includes diagnosis codes).

Samples and/or requisitions with incomplete or illegible identification cannot be accepted for testing. Once rejected, a specimen will not be returned to the unit of origin – this remains the property of the Lab.

Discrepant samples are documented in the LIS and NMC's event reporting system.

Procedure:

A. Samples, Aliquots and Test Setups

Label every sample, aliquot, and test setup with proper patient identification (2 unique identifiers). Label the body of the tube or container – do not label the lid or cap as this can be removed from the sample container. Examples of items requiring proper identification include:



- Aliquots
- Tubes used for dilutions
- Body Fluid Cell counts (use a wax pencil to label the Petri dish)
- ESR (either use a Sharpie to label the Sedimat vial or affix a label to the top of the column)
- Slides for gram stains, peripheral smears, histology stains, or crystal examinations
- Triage cartridges (use a sharpie to label the cartridge)
- Urine drug screens (use a sharpie to label the cartridge)
- Urine microscopic (sediment) tubes
- Tissue blocks

Labeling must be performed even if performing a single test.

B. Unlabeled Specimen

Unless the sample type is considered irretrievable, unlabeled specimens are rejected.

Unlabeled Specimen - Retrievable:

The following samples can easily be recollected.

- Urine
- Sputum
- Blood
- GenProbe

1. Order and cancel the requested tests with an accompanying comment indicating which tube was submitted unlabeled.

2. Contact the provider and notify them that the sample is being rejected.

Example: *“Received a request for PT/INR on an unlabeled blue-top (sodium citrate) tube.”*

Unlabeled Specimen - Irretrievable:

The following samples are considered irretrievable and are subject to technologist or supervisory review.

- Body fluids (CSF, peritoneal, pleural, synovial, bursa, etc.)
- Tissues
- Pap Smears

1. Contact the provider and inform them that the sample was submitted unlabeled. Inform them that we cannot perform the requested testing unless the person who collected the original specimen comes to the Lab, re-labels the sample, and signs an Accountability Form.

2. When reporting results, include a comment indicating that the sample was received



unlabeled and was accepted on review.

C. Requisition / Specimen Mismatch

If the identity on the requisition doesn't match the specimen, the sample should be rejected.

1. Using the identity of the patient listed on the requisition, order and cancel the tests that were requested with an accompanying comment indicating which tests and samples are being rejected.

2. Contact the provider and notify them that the sample is being rejected.

Example: *"Received a request for CBC on a purple-top (EDTA) tube labeled with a name that is different than what was indicated on the requisition."*

3. If at a later time, the identity of the specimen is confirmed to be correct, the specimen may be processed with supervisory approval upon receipt of a correct requisition and signed Accountability Form.

4. Technologists will release the test results along with the following comment:
"Specimen initially rejected due to requisition/specimen mismatch. Sample accepted upon review and receipt of a signed accountability statement."

D. Mislabeled Specimen

Mislabeled specimens are not accepted. This includes abbreviated names.

1. Order and cancel the tests that were requested and include an accompanying comment indicating which tests and tubes were mislabeled.

2. Contact the provider and notify them that the sample is being rejected.

Example: *"Received a request for BUN on a tiger-top (SST) tube that was mislabeled."*

Note: Irretrievable samples may be accepted after supervisory review. The person who collected the sample must come to the Lab and re-label the specimen. A signed accountability form must be completed prior to processing the specimen (see Unlabeled Specimen section).

E. Last Name Changes

1. If the last name on the requisition and sample do not match Meditech, but all other unique identifiers are correct (DOB, Social Security Number, billing information, etc.), contact the provider's office and request that they confirm the patient's last name.



2. On the requisition, record the name of the person providing this information, along with the date, time, and your initials. Update Meditech as needed. If the provider's office is closed, process the specimen using the "Run and Hold Testing" policy.

F. Minor Discrepancies

1. Minor discrepancies with at least two correct and unique identifiers (Name and Social Security Number) or minor discrepancies on the paperwork (requisition is correct, but billing sheet has a different spelling of name) are subject to supervisory review.

2. If supervisory staff are not available, process the specimen using the "Run and Hold Testing" policy. This section does not apply to Blood Bank samples used for Rhogam or transfusion purposes.

G. Result Codes

Whenever possible, the use of standardized comments should be utilized. Examples include the following:

- "Unlabeled specimen submitted. Unable to perform requested testing. Repeat collection requested."
- "Unlabeled specimen submitted. Sample accepted upon review and receipt of a signed accountability statement."
- "Requisition and specimen identifications do not match. Unable to perform requested testing. Repeat collection requested."
- "Specimen initially rejected due to requisition/specimen mismatch. Sample accepted upon review and receipt of a signed accountability statement."
- "Sample mislabeled. Unable to perform requested testing. Repeat collection requested."

H. Supervisory Review

Discrepancies left for supervisory review will be placed in a green folder labeled "Patient Identification Issues Requiring Review" and left in the Client Support Supervisor's mailbox.

Note Well:

- Medicare / Medicaid cards are not a reliable source of definitive patient identification, as these sometimes do not list the patient's full legal name.



- If results have been reported before an error is detected, notify the provider and/or nursing unit. Address the issue as outlined above. If warranted, a corrected report will be issued.
- An NMC event report will be completed by the person discovering any of the discrepancies listed above.
- The original copy of the Accountability Forms will be filed in the Accountability Form binder, located in the Lab Office. The form must include the signature of the tech accepting the sample and include the MRN and accession number for the sample.
- Until the problem can be resolved, discrepant samples for clinical pathology testing are held in the Office refrigerator for 7 days from the receipt date. Discrepant samples for anatomic pathology testing are held in the Tissue Receipt bin located in the Office.

Related Policies:

Unacceptable Specimens procedure (Histology Section)

Identification of Patient (NMC Policy)

Key Process Owners:

David E. Blin, MT(ASCP), MBA – Director, Laboratory Services

Thomas Suppan, MD – Medical Director, Laboratory Services

Not part of policy:

- **Patient Identification, Mislabeled Specimen, Name Discrepancy**
- **Laboratory, Sample Collection, Specimen Accountability**